1	Name and Address of Recipie	ent:	7	Fund Type:
	Agency Name Christian	County Board of Education		State
	Street Address 200 Glas	s Street		
	City, State Zip Hopkins	ville, KY 42240		Other:
			8	Method of Payment:
2	KDE Contact Information:	- 11 0	in .	Federal Cash Request
	Program Contact	David Wickersham 502-564-5130 ext. 4002		Expenditure Reimbursement
	Street Address	500 Mero St., 8 th Fl., CPT		Automatic Payment
	Budget Contact	Vickie Terry – 502-564-1979 ext. 4330	-4/	Lump Sum
	Street Address	500 Mero Street., 16 th Fl., CPT		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, KY 40601		
		- TA -	9	Reimbursement Frequency:
3	Description/Fund Source of A			Monthly
	Description	Title I, School Improvement Grant (SIG)		Quarterly
	Fund Source	Title I, Part A Section 1003 (g)		Other
	CFDA#	84.377A		
	PR/AWARD NUMBER (FAIN)	S377A140018		
	MUNIS Project Number	460A	10	Financial Reporting Method:
	MOA Number	N/A		Electronic Submission
	Pass-through Number	3100302-14		
				Other MUNIS reports must be emailed to Vickie Terry at
			1	vickie.terry@education,.ky.gov. A report must be
				submitted for each school.
4	• •	CLB Title I, Part A Section 1003(g), 34CFR Part 200; EDGAR		
	` .	5.650-76.662 (participation of students enrolled in private	000	TED FOR
	* *	85 and the Uniform Administrative Requirements, Cost	PAF	RED FOR
-		ments for Federal Awards in 2 CFR Part 200.	11	Evaluations:
5	Award Amount: \$699,301	3 0 6 6	11	Evaluations:
•	Davied of Assessed	Venezueno Depresante		
6	Period of Award: November 1, 2015 – June 30,	KENTUCKY DEPARTMENT	OF E	DUCATION
12	Consortia/Partnership Mem			
13			ad prior	to implementing changes. District will be reporting toward meeting
13	•	asis. The final Federal Cash request must be submitted by S		
14	Authorized By (Name/Title):	•	•	Date: November 20, 2015
		Division of Consolidated Plans and Audits		

1	Name and Address of Recipient:		7	Fund Type:
	Agency Name Greenup	County Board of Education		State
	Street Address 45 Musk	eteer Drive		
	City, State Zip Greenup	, KY 41144		Other:
			8	Method of Payment:
2	KDE Contact Information:	- 11 01		Federal Cash Request
	Program Contact	David Wickersham 502-564-5130 ext. 4002	LI D	Expenditure Reimbursement
	Street Address	500 Mero St., 8 th Fl., CPT		Automatic Payment
	Budget Contact	Vickie Terry – 502-564-1979 ext. 4330	-44	Lump Sum
	Street Address	500 Mero Street., 16 th Fl., CPT		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, KY 40601		
			9	Reimbursement Frequency:
3	Description/Fund Source of A	ward and Fiscal Year:		Monthly
	Description	Title I, School Improvement Grant (SIG)		Quarterly
	Fund Source	Title I, Part A Section 1003 (g)		Other
	CFDA#	84.377A		
	PR/AWARD NUMBER (FAIN)	S377A140018		
	MUNIS Project Number	460A	10	Financial Reporting Method:
	MOA Number	N/A		Electronic Submission
	Pass-through Number	3100302-14		
				Other MUNIS reports must be emailed to Vickie Terry at
			11	vickie.terry@education,.ky.gov. A report must be
			10	submitted for each school.
4		CLB Title I, Part A Section 1003(g), 34CFR Part 200; EDGAR		
	· · · · · · · · · · · · · · · · · · ·	5.650-76.662 (participation of students enrolled in private		
	***	B5 and the Uniform Administrative Requirements, Cost	PAF	KED FOR
_		ments for Federal Awards in 2 CFR Part 200.		-C - C
5	Award Amount: \$427,230	3 0 6 6	11	Evaluations:
•	5 : 1 (4)	V		
6	Period of Award:	KENTUCKY DEPARTMENT	OF E	DUCATION
12	November 1, 2015 – June 30,			
12	Consortia/Partnership Meml			to involve action the core District William Co.
13				to implementing changes. District will be reporting toward meeting
1.0		asis. The final Federal Cash request must be submitted by S		Date: November 20, 2015
14	Authorized By (Name/Title):	Division of Consolidated Plans and Audits		Date: November 20, 2015
		Division of Consolidated Plans and Addits		

1	Name and Address of Recipient:		7	Fund Type:
	Agency Name Jefferson County Board of Education			State
	Street Address 3332 Ne	wburg Road		
	City, State Zip Louisvisl	le, KY 40232		Other:
			8	Method of Payment:
2	KDE Contact Information:	-31 61		Federal Cash Request
	Program Contact	David Wickersham 502-564-5130 ext. 4002	110	Expenditure Reimbursement
	Street Address	500 Mero St., 8 th Fl., CPT		Automatic Payment
	Budget Contact	Vickie Terry – 502-564-1979 ext. 4330		Lump Sum
	Street Address	500 Mero Street., 16 th Fl., CPT		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, KY 40601		
			9	Reimbursement Frequency:
3	Description/Fund Source of A	Award and Fiscal Year:		Monthly
	Description	Title I, School Improvement Grant (SIG)		Quarterly
	Fund Source	Title I, Part A Section 1003 (g)		Other
	CFDA#	84.377A		
	PR/AWARD NUMBER (FAIN)	S377A140018		
	MUNIS Project Number	460A	10	Financial Reporting Method:
	MOA Number	N/A		Electronic Submission
	Pass-through Number	3100302-14		
				Other MUNIS reports must be emailed to Vickie Terry at
				vickie.terry@education,.ky.gov. A report must be
_				submitted for each school.
4		CLB Title I, Part A Section 1003(g), 34CFR Part 200; EDGAR		
	34 CFR Parts /6 (except for /6	5.650-76.662 (participation of students enrolled in private	DAI	DED EOD
	Dringinles and Audit Require	85 and the Uniform Administrative Requirements, Cost	PAR	ED FUR
5	Award Amount: \$3,782,139	ments for Federal Awards in 2 CFR Part 200.	11	Evaluations:
5		ern Creek High \$341,335/Iroquois High \$317,240/Knight		Evaluations.
		n \$319,204/The Academy @Shawnee \$344,593/Valley High	o	DUCATION
		7,947/Western Middle \$353,412	OF E	DUCATION
6	Period of Award:	• •		
	November 1, 2015 – June 30,	2018		
12	Consortia/Partnership Members:			
13	Special Instructions/Condition	ns: Any revisions to the budget or the plan must be approve	d prior	to implementing changes. District will be reporting toward meeting
		asis. The final Federal Cash request must be submitted by S		
14	Authorized By (Name/Title): David Wickersham, Director Date: November 20, 2015			Date: November 20, 2015
	Division of Consolidated Plans and Audits			

1	Name and Address of Recipient:		7	Fund Type:
	Agency Name Lawrence	e County Board of Education		State
	Street Address 50 Bulld	og Lane		
	City, State Zip Louisa, k	Y 41230		Other:
			8	Method of Payment:
2	KDE Contact Information:			Federal Cash Request
	Program Contact	David Wickersham 502-564-5130 ext. 4002		Expenditure Reimbursement
	Street Address	500 Mero St., 8 th Fl., CPT		Automatic Payment
	Budget Contact	Vickie Terry – 502-564-1979 ext. 4330	-4/	Lump Sum
	Street Address	500 Mero Street., 16 th Fl., CPT		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, KY 40601		
			9	Reimbursement Frequency:
3	Description/Fund Source of A	Award and Fiscal Year:		Monthly
	Description	Title I, School Improvement Grant (SIG)		Quarterly
	Fund Source	Title I, Part A Section 1003 (g)		Other
	CFDA#	84.377A		
	PR/AWARD NUMBER (FAIN)	S377A140018		
	MUNIS Project Number	460A	10	Financial Reporting Method:
	MOA Number	N/A		Electronic Submission
	Pass-through Number	3100302-14		
				Other MUNIS reports must be emailed to Vickie Terry at
				vickie.terry@education,.ky.gov. A report must be
			100	submitted for each school.
4		CLB Title I, Part A Section 1003(g), 34CFR Part 200; EDGAR		
	· · · · · · · · · · · · · · · · · · ·	5.650-76.662 (participation of students enrolled in private		15D 50D
	***	85 and the Uniform Administrative Requirements, Cost	PAF	KED FOR
		ments for Federal Awards in 2 CFR Part 200.		.C. C
5	Award Amount: \$290,996	3 0 6 6	11	Evaluations:
		1/	-	
6	Period of Award:	KENTUCKY DEPARTMENT	OF E	DUCATION
	November 1, 2015 – June 30,			
12	Consortia/Partnership Meml			
13				to implementing changes. District will be reporting toward meeting
		asis. The final Federal Cash request must be submitted by S		
14	Authorized By (Name/Title):	· · · · · · · · · · · · · · · · · · ·		Date: November 20, 2015
		Division of Consolidated Plans and Audits		

1	Name and Address of Recipient:		7	Fund Type:
	Agency Name Metcalfe County Board of Education			State
	Street Address 109 Sart	in Drive		Federal
	City, State Zip Edmont	on, KY 42129		Other:
			8	Method of Payment:
2	KDE Contact Information:	-11.0	line .	Federal Cash Request
	Program Contact	David Wickersham 502-564-5130 ext. 4002		Expenditure Reimbursement
	Street Address	500 Mero St., 8 th Fl., CPT		Automatic Payment
	Budget Contact	Vickie Terry – 502-564-1979 ext. 4330	14/	Lump Sum
	Street Address	500 Mero Street., 16 th Fl., CPT		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, KY 40601		
			9	Reimbursement Frequency:
3	Description/Fund Source of	Award and Fiscal Year:		Monthly
	Description	Title I, School Improvement Grant (SIG)		Quarterly
	Fund Source	Title I, Part A Section 1003 (g)	1	Other
	CFDA#	84.377A		
	PR/AWARD NUMBER (FAIN)	S377A140018		
	MUNIS Project Number	460A	10	Financial Reporting Method:
	MOA Number	N/A		Electronic Submission
	Pass-through Number	3100302-14		
			•	Other MUNIS reports must be emailed to Vickie Terry at
			1	vickie.terry@education,.ky.gov. A report must be
			10	submitted for each school.
4	Grant Authority (Source): No	CLB Title I, Part A Section 1003(g), 34CFR Part 200; EDGAR		•
	34 CFR Parts 76 (except for 76	6.650-76.662 (participation of students enrolled in private		
	schools)), 77, 80, 81, 82, and	85 and the Uniform Administrative Requirements, Cost	EPAI	RED FOR
	Principles, and Audit Require	ments for Federal Awards in 2 CFR Part 200.		C C
5	Award Amount: \$473,387	3 0 6 6	11	Evaluations:
6	Period of Award:	KENTUCKY DEPARTMENT	OF E	DUCATION
	November 1, 2015 – June 30,			
12	Consortia/Partnership Mem	bers:		
13				to implementing changes. District will be reporting toward meeting
	annual goals on a quarterly basis. The final Federal Cash request must be submitted by September 28, 2018.			
14	Authorized By (Name/Title):	David Wickersham, Director		Date: November 20, 2015
	Division of Consolidated Plans and Audits			
	Division of Consolidated Plans and Audits			

1	Name and Address of Recipient:		7	Fund Type:
	Agency Name Newport Independent Board of Education			State
	Street Address 30 W. Ei	ghth St.		
	City, State Zip Newpor	t, KY 41071		Other:
			8	Method of Payment:
2	KDE Contact Information:	-116	M -	Federal Cash Request
	Program Contact	David Wickersham 502-564-5130 ext. 4002	M a	Expenditure Reimbursement
	Street Address	500 Mero St., 8 th Fl., CPT	1//	Automatic Payment
	Budget Contact	Vickie Terry – 502-564-1979 ext. 4330		Lump Sum
	Street Address	500 Mero Street., 16 th Fl., CPT		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, KY 40601		
			9	Reimbursement Frequency:
3	Description/Fund Source of A			Monthly
	Description	Title I, School Improvement Grant (SIG)		Quarterly
	Fund Source	Title I, Part A Section 1003 (g)		Other
	CFDA#	84.377A		
	PR/AWARD NUMBER (FAIN)	S377A140018		
	MUNIS Project Number	460A	10	Financial Reporting Method:
	MOA Number	N/A		Electronic Submission
	Pass-through Number	3100302-14		
			1	Other MUNIS reports must be emailed to Vickie Terry at
				vickie.terry@education,.ky.gov. A report must be
_	Court Authority (Court)	CLD Title I Don't A Continue 4002/cl 2405D Don't 200 FDCAD	_	submitted for each school.
4		CLB Title I, Part A Section 1003(g), 34CFR Part 200; EDGAR 5.650-76.662 (participation of students enrolled in private		
	, ,	85 and the Uniform Administrative Requirements, Cost	EPA I	RED FOR
		ments for Federal Awards in 2 CFR Part 200.		ED FOR
5	Award Amount: \$1,459,357	ments for rederal Awards in 2 critical 200.	11	Evaluations:
	District \$147,827/Newport H	igh \$1.311.530		Etalacions
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	KENTUCKY DEPARTMENT	OF F	DUCATION
6	Period of Award:	IZENTOCKI DEPARTMENT		DOCATION
	November 1, 2015 – June 30,	2018		
12	Consortia/Partnership Meml		I .	
13	Special Instructions/Condition	ns: Any revisions to the budget or the plan must be appro	ved prior	to implementing changes. District will be reporting toward meeting
	-	asis. The final Federal Cash request must be submitted by	-	
14	Authorized By (Name/Title):	David Wickersham, Director	<u> </u>	Date: November 20, 2015
		Division of Consolidated Plans and Audits		